

CHECKLIST FOR THE COMPLETION OF THE BOILER PLATE

2-1-99

# 1: NAME OF PROJECT:	#2: A/E NUMBER:
# 3: JURISDICTION RESPONSIBLE FOR ISSUING BUILDING PERMIT:	
#4: THE ARCHITECT/ENGINEER: NAME: _____ — ADDRESS: _____ — PHONE/FAX #s: _____ —	
#5: PRE-BID WALK-THRU? YES _____ NO _____ IF YES, WHERE?: _____ — DATE & TIME?: _____ — WHO IS THE AGENCY CONTACT? NAME: _____ — ADDRESS: _____ — PHONE #: _____ —	
#6: AMOUNT OF REFUNDABLE PLAN DEPOSIT REQUIRED, IF ANY? \$ _____ (INVBID)	
#7: LIST OF ALL BUILDERS EXCHANGES. (USE AN ATTACHED SHEET), (ITB-1)	
#8: PROPOSAL FORM: NEEDS TO BE CUSTOMIZED FOR THE PROJECT? YES _____ NO _____ IF YES, PROVIDE A DESCRIPTION AND PRIORITY ORDER OF ALTERNATES. ON AN ATTACHED SHEET, LIST THE BID ITEMS THAT NEED TO BE ADDED.	
#9: TIME ALLOTTED FOR COMPLETION OF WORK? _____ (Calendar Days) IF DAYS ARE TIED TO OTHER FACTORS, SO LIST ON A SEPARATE SHEET. (SGC-1)	
#10: AMOUNT OF LIQUIDATED DAMAGES. \$ _____ (per Calendar Day of Delay) (SGC-1)	
#11: THE CONTACT PERSON FOR AN ON-SITE THE INSPECTION BY THE BIDDERS. NAME/TITLE: _____ — ADDRESS: _____ — PHONE #: _____ —	
#12: STATE WAGE RATES, IF THEY APPLY: (STATE WAGE RATES APPLY TO PROJECTS COSTING \$25,000 OR MORE): YES _____ NO _____	
<i>Project Manager and Agency shall verify the source of funding and federal requirements PRIOR to submitting this form!</i>	

#13: FEDERAL
REQUIREMENTS:
YES ____ NO ____

FEDERAL
WAGE RATES:
YES ____ NO ____

DEBARMENT
FORM:
YES ____ NO ____

Please Complete This Checklist and Return It to The Project Manager, A/E Div.